

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	10-2-01
FORMALITY REVIEW	NR	586	10-29-01
RESPONSE FORMALITY REVIEW	JA	852	04/19/02
	JA	838	07-12-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	1/6/02
2	N
3	N
4	N
5	N
6	N
7	N
8	N
9	N
10	N
11	N
12	N
13	N
14	N
15	N
16	N
17	N
18	N
19	N
20	N
21	N
22	N
23	N
24	N
25	N
26	N
27	N
28	N
29	N
30	N
31	N
32	N
33	N
34	N
35	N
36	N
37	N
38	N
39	N
40	N
41	N
42	N
43	N
44	N
45	N
46	N
47	N
48	N
49	N
50	N

Claim	Date
Final Original	
51	N
52	N
53	N
54	N
55	N
56	N
57	N
58	N
59	N
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92	N
93	N
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99	N
100	N

Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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3/13/02  
 10/19/02  
 10/27/02  
 12/5/02  
 2/1/03